

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION | ib | | |
| O.I.P.E. CLASSIFIER | | 49 | 05.11.01 |
| FORMALITY REVIEW | B2 | 5C3-883 | 07.26.01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| 1 | 10/12/01 |
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If more than 150 claims or 10 actions
 staple additional sheets here

BEST AVAILABLE COPY

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